

STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY	ADDITIONAL ARRESTING AGENCIES	<i>For Court Use Only</i>																				
Instructions ▼ Use this form only if you have been arrested by more than 2 police or sheriff's department. If you have been arrested by only 2 police or sheriff's departments, do not complete this form. Directly above, enter the name of county where you will file the case. Enter your name and birth date. Enter all case numbers listed in this area of the <i>Request</i> form.	Request of: _____ Your name (<i>First, middle, last name</i>) _____ Date of birth _____ Case numbers for all of your juvenile court records in this County: <table style="width: 100%; border-collapse: collapse;"> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> </table>		_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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In **1**, enter the names and addresses of the additional police or sheriff's department that arrested you.

1. To: Additional Police or Sheriff's Department that arrested you:

<i>Name</i>	<i>Name</i>
<i>Street Address</i>	<i>Street Address</i>
<i>City</i> <i>State</i> <i>ZIP</i>	<i>City</i> <i>State</i> <i>ZIP</i>

<i>Name</i>	<i>Name</i>
<i>Street Address</i>	<i>Street Address</i>
<i>City</i> <i>State</i> <i>ZIP</i>	<i>City</i> <i>State</i> <i>ZIP</i>

/s/ _____	_____
<i>Your Signature</i>	<i>Date</i>

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name. Then file it with the *Notice of Filing for Juvenile Expungement*.

Enter your name, address, and phone number.

Prepared by: _____

Street Address: _____

City, State, ZIP: _____

Phone Number: _____